SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

Owner(s):

APPLICATION FOR PERMIT



Permit #:	20-0237
Date:	9-1-20
Amount Paid:	\$1.185 6/50
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CON	ISTRUCTIO	N <u>UNTIL</u>	ALL PERMITS	HAVE BEEN ISSUED TO	APPLICANT.	Original	Application ML	JST be subm	itted	FILL OUT	IN INK (N	O PEN	ICIL)
TYPE OF PERMIT	REQUES	TED→			AND DESCRIPTION OF THE PARTY OF		□ CONDITION		SPECIA	L USE B	.O.A. 🗆	OTHE	R
Owner's Name: Steven	To	lens.	Coc		Mailing Address: しらといい		1000	City/State/Z	ip:	17 5W	/	Telepho	
Address of Propert	y:	1000	A 1	sicy /	City/State/) Luite	171100	na, u	I 54			1580
XXXS	gar	Ba	y Kd		Cah	le.	WI	5480	31			Cell Pho	one:0300
Contractor: Plumber: TBD Plumber Pt								r Phone:					
A 4			cation on beh	alf of Owner(s))	Agent Phone:		Agent Maili	ing Address (include Cit	y/State/Zip):	CUID	Written Authori	
Authorized Agent: (Person Signing Application on behalf of Owner(s)) Agent Phone: Agent Mailing Address (include City/State/Zip): Fron Kiver: WF 54847 6173 Fron Lake Rd								Attache Yes	d □ No				
PROJECT LOCATION Legal Description: (Use Tax Statement) 1 Tax ID# 3 70 85						Recorded Do	Cument: (S	howing (Ownership)				
1/4,1/4 Gov't Lot Lot(s) CSM Vol & Page CSM Doc# Lot(s)# Block # Subdivision:													
Section <u>2</u>	, Tow	nship _	43 N,	Range 6 W		n gf: 1	nakag	on		Lot Size		Acres	35
	☐ Is I	Property	/Land with	in 300 feet of River,		ermittent)	Distance Stru		m Shorelii		our Propert	v	re Wetlands
✗ Shoreland —				ard side of Floodplain? If yescontinuing within 1000 feet of Lake, Pond or Flowage				_ feet			Present?		
	XIS I	roperty	/Land with	in 1000 feet of Lake	, Pond or Flowa If yescontin		Distance Structure is from Shorelin			ine: Yes		XYes □ No	
☐ Non-Shoreland										feet	□ No		_ NO.
Value at Time									Valence				
of Completion				Project	Duntan		Total # of			hat Type of			Type of
* include donated time		Projec	t	# of Stories	Project Foundati		bedrooms			anitary Syst			Water
& material							property			on the property			on property
	New	Constr	uction	1-Story		nt	□ 1	☐ Municipal/City					☐ City
*204	☐ Addit	tion/Al	eration	☐ 1-Story + Loft	' Foundation			(New) Sanitary Specify Type:			pe:		Well
*395,000	□ Conv	Conversion		☐ 2-Story	√ □ Slab		□ 3	☐ Sanitary (Exists) Specify Type:			pe:		
	Reloc	ate (exi	sting bldg)			X 4		□ Privy (Pit) or □ Vaulted (min 200 gallon)					
	☐ Run a		ess on	Use			None	□ Portable (w/service contract)					
Property			X Year Round				☐ Compost Toilet						
								None	!				
Existing Structur	e: (if add	ition, alt	eration or bu	siness is being applie			<i>(</i> **)	Width:			Height:		
Proposed Const	ruction:	(overa	ll dimension	ns)	Leng	th:	98	Width:	50		Height:	26	
Proposed U	se	1			Proposed	Structur	е			Dimens	sions		Square ootage
				Structure (first st						(x)		
	-	X	Residenc	e (i.e. cabin, hunt	ing shack, etc.	c.) [1064 + 1,258				(X)	2.	922
Residential Use with Loft (X)								((1)					
	-			with (2 nd) Porc	Covercal					(8 X	18,51	_/	48
				with a Deck							321	1	92
Commercial Use with (2nd) Deck Govered Datio (8							(8 x	151	1	20			
							125.5x	3-61	8	75			
□ Bunkhouse w/ (□ sanitary, or □ sleeping quarters, or □ cooking & food prep facilities) (X)													
)				
☐ Municipal Use ☐ Addition/Alteration (explain) ☐ Accessory Building (explain)						(X)						
Rec'd for Issuance						(X)						
C **-				ial Use: (explain))		
Condition			onal Use: (explain))			
Secretarial Staff Other: (explain) (x)							
FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.													

(If there are Multiple Own wners must sign or letter(s) of authorization must accompany this application) Date 6-10-2020 Authorized Agent: Jung 45150 Sugar Copy of Tax Statement V Original Application MUST be submitted 54821

the box below: Draw or Sketch your Property (regardless of what you are applying for) Fill Out in Ink - NO PENCIL **Proposed Construction** Show Location of: Show / Indicate: North (N) on Plot Plan (2)Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road) (3)All Existing Structures on your Property (4) Show: $(*) \ \textbf{Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) \ \textbf{Holding Tank (HT)} \ and/or (*) \ \textbf{Privy (P)}$ (5)Show: (6) Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20% Show any (*): See attachment

Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Setback Measurements			Description	Setback Measurements		
(thur)							
Setback from the Centerline of Platted Road	150	Feet		Setback from the Lake (ordinary high-water mark)	200 +/- Feet		
Setback from the Established Right-of-Way	110	Feet		Setback from the River, Stream, Creek	N/A Feet		
0.1	1			Setback from the Bank or Bluff	N/A Feet		
Setback from the North Lot Line Co Hwy	NA	Feet					
Setback from the South Lot Line	1 2004	Feet		Setback from Wetland	NH Feet		
Setback from the West Lot Line Row Sugar Bank	37	Feet		20% Slope Area on the property	XYes □ No		
Setback from the East Lot Line	35	Feet		Elevation of Floodplain	Feet		
70 G Sugar Bay Rd							
Setback to Septic Tank or Holding Tank	TBD	Feet		Setback to Well TBD	Feet		
Setback to Drain Field	TBO.	Feet					
Setback to Privy (Portable, Composting)	NA	Feet					
Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the							

other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

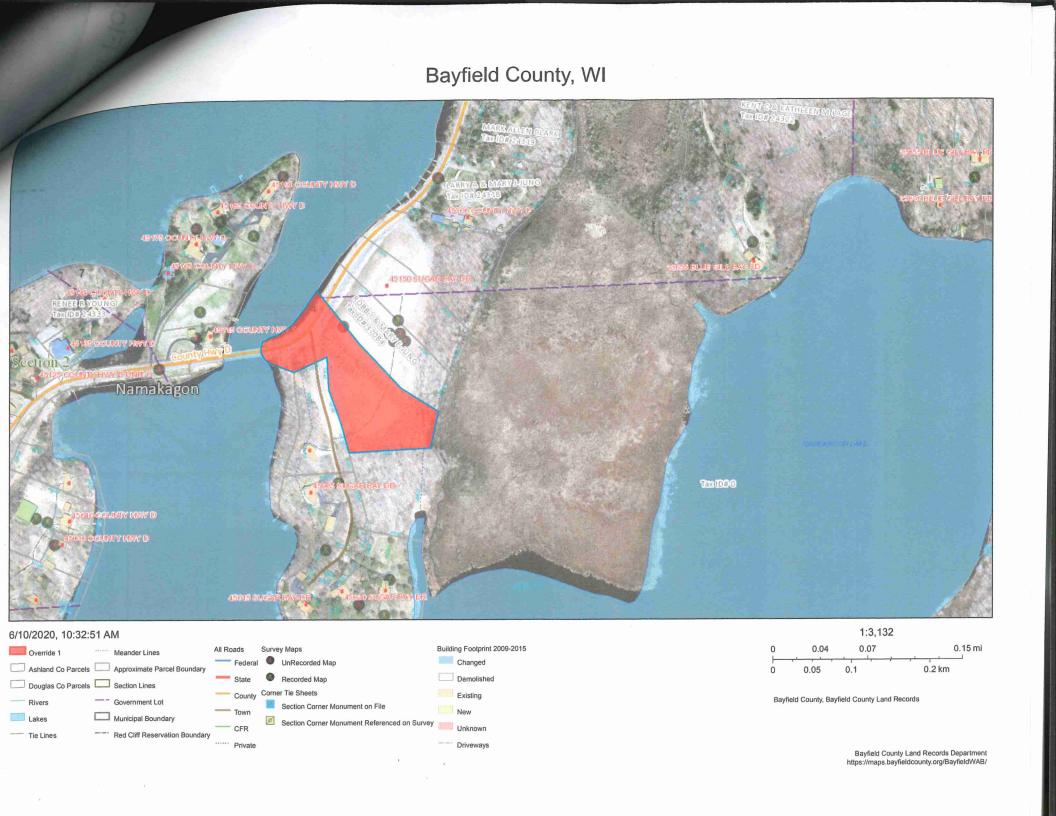
(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For the Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number:	-1398	# of bedrooms:	Sanitary Date: 8-27-2020				
Permit Denied (Date):	Reason for Denial:	Reason for Denial:						
Permit #: 20-0837	Permit Date: 9-1-	-20						
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming	ous Lot(s))	Mitigation Required Mitigation Attached		Affidavit Required Affidavit Attached Yes No				
Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #:	#:							
		Were Property Line	es Represented by Owner Was Property Surveyed	☐ Yes ☐ No ☐ Yes ☐ No				
Inspection Record:				Zoning District (R-1)				
STAMED		1		Lakes Classification (/)				
Date of Inspection: 6/16/20	Inspected by:			Date of Re-Inspection:				
Condition(s): Town, Committee or Board Conditions Attached? Yes No-(If No they need to be attached.) Build as submittee or Board Conditions Attached? Yes No-(If No they need to be attached.) Cot required upc Inspections								
Signature of Inspector: Date of Approval:								
Hold For Sanitary: Hold For TBA:	davit: 🗌	Hold For Fees:						



City, Village, State or Federal May Also Be Required

AND USE - X
SANITARY - 20-139S
SIGN SPECIAL CONDITIONAL BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

Steven & Jolene Cooley / Mike Furtak, Agent 20-0237 Issued To: No. Town of Namakagon Range 6 W. **Township** Location: 1/4 Section CSM# 1903 Subdivision Lot 4 Block Gov't Lot

For: Residential Use: [1- Story; <u>Residence</u> (Irregular) = 2,922 sq. ft.; <u>Covered Porch</u> (8' x 18.5') = 148 sq. ft; <u>Deck</u> (6' x 32) = 192 sq. ft.; <u>Deck #2 with Covered Patio</u> (8' x 15' (5.5' x 36') = 995 sq. ft.] Total Overall = 4,257 sq. ft.

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Build as submitted. Get required UDC inspections.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

September 1, 2020

Date